## COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

a patent is sought on the	e invention entitled:		
METHOD FOR PROD	DUCING IMIDAZOLIU	M SALTS	÷ † 1000
the specification of whi	ch is being filed concurren	itly herewith.	
OR			
the specification of whi	ch was filed on	as United States ap	oplication Serial No.
OR			
The specification of wh PCT/DE03/02285.	ich was filed on July 8, 20	003 as PCT International Applic	ation No.
-	e reviewed and understand amended by any amendme	the contents of the above idention that the contents of the above idention that the contents of the contents o	fied specification,
	to disclose information when 37, Code of Federal Regu	nich is material to the examinatial lations §1.56(a).	on of this application
application(s) for patent	or inventor's certificate list patent or inventor's certific	e 35, United States Code, §119 of sted below and have also identifate having a filing date before the	ied below any
Prior Foreign Applica	ation(s)		Priority Claimed
102 31 368.7 (Number)	Germany (Country)	11/07/2002 (Day/Month/Yr. Filed)	XXI yes □ no
(Number)	(Country)	(Day/Month/Yr. Filed)	□ yes □ no
(Number)	(Country)	(Day/Month/Yr. Filed)	□ yes □ no
(Number)	(Country)	(Day/Month/Yr Filed)	□ yes □ no

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I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s)

listed below.	• • • • • • • • • • • • • • • • • • • •	,
(Application Serial No.)	(Filing Date)	
(Application Serial No.)	(Filing Date)	
listed below and, insofar as the s in the prior United States applica States Code, §112, I acknowledge	subject matter of each of ation in the manner progethe duty to disclose a .56(a) which occurred	Code, §120 of any United States application(s) of the claims of this application is not disclosed evided by the first paragraph of Title 35, United material information as defined in Title 37, between the filing date of the prior application application:
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
made on information and belief a with the knowledge that willful f imprisonment, or both, under Se	are believed to be true; False statements and the ction 1001 of Title 18 o	own knowledge are true and that all statements and further that these statements were made e like so made are punished by fine or of the United States Code and that such willful ication or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint

3   _	Practioners Associated with the	27387
	Customer Number:	

as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned.

**DIRECT TELEPHONE CALLS TO:** 

Kurt G. Briscoe

(212) 808-0700

DATE:

CITIZENSHIP:

FULL NAME OF SOLE OR FIRST INVENTOR: Frank Glorius INVENTOR'S SIGNATURE: Fronk Stand DATE: December 21, 2004 RESIDENCE: Gutenbergstrasse 10, 35085 Leidenhofen, Germany CITIZENSHIP: German POST OFFICE ADDRESS: Philipps-Universität Marburg, Fachbereich Chemie, Hans-Meerwein-Strasse, 35032 Marburg, Germany FULL NAME OF SECOND INVENTOR: DATE: INVENTOR'S SIGNATURE:\_\_\_\_ RESIDENCE: CITIZENSHIP: POST OFFICE ADDRESS: FULL NAME OF THIRD INVENTOR:\_\_\_\_ INVENTOR'S SIGNATURE:\_\_\_\_\_ DATE: RESIDENCE: CITIZENSHIP: POST OFFICE ADDRESS: FULL NAME OF FOURTH INVENTOR:\_\_\_\_\_ INVENTOR'S SIGNATURE:\_\_\_\_ DATE: \_\_\_\_\_ RESIDENCE: CITIZENSHIP: POST OFFICE ADDRESS: FULL NAME OF FIFTH INVENTOR: INVENTOR'S SIGNATURE:\_\_\_\_ DATE: RESIDENCE: CITIZENSHIP: POST OFFICE ADDRESS: FULL NAME OF SIXTH INVENTOR:

INVENTOR'S SIGNATURE:\_\_\_\_

POST OFFICE ADDRESS:

RESIDENCE: